## PART B - FEE(S) TRANSMITTAL

| DEC 2 7 2005   | his form, together wit  | h applicable fe   | Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 |  |   |   |  |
|--|---|---|---|--|---|---|--|
| INSTRUCTIONS: This for appropriate. All further controlled unless controlled and carried to the controlled to the contro | rm should be used for tran<br>rrespondence including the l<br>below or directed otherwise                                   | smitting the ISSU<br>Patent, advance ordin Block 1, by (a)          | or <u>Fax</u> E FEE and PUBI ders and notificati ) specifying a new                                       | ICATION FEE (if requon of maintenance fees vectorespondence address  | ired). Blocks 1 through 5 swill be mailed to the current; and/or (b) indicating a separate  | hould be completed where correspondence address as arate "FEE ADDRESS" for          |  |
| CURRENT-CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  23931 7590 12/13/2005  |   |   |   | Note: A centificate of   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.   |   |  |
| DAVID M SIGMOND<br>487 BLACKFOOT STREET<br>SUPERIOR, CO 80027  |   |   |   | Ce I hereby certify that to States Postal Service addressed to the Ma transmitted to the USI   | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  |   |  |
| 2/28/2005 EAREGAY2 00000015 502178 10655819  |   |   |   | Davi   | David Sigmond (Depositor's name)  |   |  |
| 1 FC:2501 700.00 DA<br>2 FC:8001 15.00 DA  |   |   |   | Signature)   |   |   |  |
| APPLICATION NO.  | FILING DATE   | FIRST NAMED I   |   | ENTOR  | ATTORNEY DOCKET NO.   | CONFIRMATION NO.  |  |
| 10/655,819   | 09/05/2003  | Cheng-Lien  |   | niang  | BDG005-1-4  | 8002  |  |
| APPLN. TYPE  | SMALL ENTITY  | CTOR PACKAGE DEVICE THAT INCLUDES                                   |   | PUBLICATION FEE  | TOTAL FEE(S) DUE  | DATE DUE  |  |
| nonprovisional   | YES   | \$700   |   | \$0  | \$700   | 03/13/2006  |  |
|  | EXAMINER  |   | IT I  | CLASS-SUBCLASS   | ٦   |   |  |
| ZARNEKE, DAVID A   |   | 2891  |   | 257-787000   | J   |   |  |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  [2] the nar registered PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer  2 registered  |   |   |   | ng on the patent front page, list as of up to 3 registered patent attorneys t, alternatively, t of a single firm (having as a member a torney or agent) and the names of up to patent attorneys or agents. If no name is me will be printed. |   |   |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Bridge Semiconductor Corporation Taiper Taiwan   |   |   |   |  |   |   |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government  |   |   |   |  |   |   |  |
| 4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):   |   |   |   |  |   |   |  |
| Issue Fee  |   |   |   |  |   |   |  |
| Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 503178 (enclose an extra copy of this form).   |   |   |   |  |   |   |  |
| a. Applicant claims  | s (from status indicated abov<br>SMALL ENTITY status. See   | 37 CFR 1.27.  | ☐ b. Applicant i  | s no longer claiming SM/   | ALL ENTITY status. See 37 (   | CFR 1.27(g)(2).   |  |
| The Director of the USPTO<br>NOTE: The Issue Fee and<br>interest as shown by the re-   | ) is requested to apply the Iss<br>Publication Fee (if required)<br>cords of the United States Pat                          | ue Fee and Publica<br>will not be accepte<br>ent and Trademark      | tion Fee (if any) o<br>d from anyone oth<br>Office.   | r to re-apply any previous<br>er than the applicant; a re  | sly paid issue fee to the applic<br>gistered attorney or agent; or  | eation identified above.<br>the assignee or other party in                          |  |
| Authorized Signature Signature   |   |   |   | Date   | 19/16/02  |   |  |
| Typed or printed name David Sigmond  |   |   |   | Registratio  | n No. 34,013  |   |  |
| an application. Confidential submitting the completed at this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 2231.  | ality is governed by 35 U.S.C application form to the USP1 ans for reducing this burden, s ginia 22313-1450. DO NOT 3-1450. | 122 and 37 CFR O. Time will vary hould be sent to th SEND FEES OR ( | depending upon (e Chief Informatic  | on is estimated to take 12 he individual case. Any on Officer, U.S. Patent an RMS TO THIS ADDRES   | the public which is to file (as minutes to complete, include comments on the amount of the different of the comments of the commissione of the commissione of the commissione of the contract | ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450 |  |